

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>6/28/04</u>		2 Serial/Patent # <u>10/084,398</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
<input checked="" type="checkbox"/>	Extension of Time		<u>6/28/04</u>	\$ <u>950.00</u>							
	Notice of Appeal/Appeal			\$							
	Petition			\$							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND								
			\$ <u>950.00</u>								
8 TO BE REFUNDED BY:											
10 REASON:		<input type="checkbox"/> Treasury Check									
	Overpayment	<input checked="" type="checkbox"/> Credit Deposit A/C #:									
	Duplicate Payment	9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">3</td> <td style="width: 20px;">--</td> <td style="width: 20px;">2</td> <td style="width: 20px;">7</td> <td style="width: 20px;">2</td> <td style="width: 20px;">5</td> </tr> </table>			1	3	--	2	7	2	5
1	3	--	2	7	2	5					
<input checked="" type="checkbox"/>	No Fee Due (Explanation):										
<i>Unnecessary</i>											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>WAN LAYMON</u>		TITLE: <u>Ret. Exam</u>									
SIGNATURE: <u><i>Wm Laymon</i></u>		PHONE: _____									
OFFICE: _____											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u><i>William Kelly</i></u>		DATE: <u>6/28/04</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B